

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ZB Limited Partnership
c/o Prentice-Hall Corporation System
2711 Centerville Rd., Ste 400
Wilmington De 19808

2. Article Number

(Transfer from service label)

7004 2510 0003 6669 8409

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address identical to item 1?

☐ Yes

If YES, enter delivery address below

☐ No

MAY - 5 2005

3. Service Type

☒ Certified Mail

☒ Express Mail

☐ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes